Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			22				ſ	RATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 2			X\$ 9=	18	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0		I	X40=		OR	X80=	;
MULTIPLE DEPENDENT CLAIM P			RESENT				ļ	+135=			+270=	
If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	Ĺ	TOTAL	373	OR	TOTAL	
CLAIMS AS AMENDED - PART II								IOIAL	7/2	OR		THAN
(Column 1)				(Colu	mn 2) (Column 3)		•	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A-		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u> =		X40=		OR	X80=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN'	I CLAIM			+135=	:	OR	+270=	
			**				/	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	1 -					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIRA	=		X40=		OR	X80=	
_	LINO! PHESE	NTATION OF M	OLITPLE DEI	CINDEN	CLAIM		」	+135=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)			mn 2)	(Column 3)		ADDIT. FEE		_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	\prod	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	[X40=		OR	X80=	-
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		۱ ۱					
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2, writ	e "0" in co	olumn 3.	L	+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Num						er fou	nd in the app	propriate bo	x in co	lumn 1.	